DOCUMENT RESUME

ED 338 422 PS 020 025

AUTHOR Masters, Janice
TITLE Project KIND (Keeping Interfering Noncompliance Down): A Social Skills Training Program for Noncompliant Primary Students.
PUB DATE 91
NOTE 88p.; Ed.D. Practicum, Nova University.
PUB TYPE Dissertations/Theses - Practicum Papers (043)

EDRS PRICE MF01/PC04 Plus Postage.
DESCRIPTORS Academic Achievement; Antisocial Behavior; *Behavior Problems; *Compliance (Psychology); *Elementary School Students; Grade 2; High Risk Students; *Interpersonal Competence; Primary Education; Program Effectiveness; *Social Behavior; Student Behavior; Study Habits
IDENTIFIERS Behavior Management; *Project KIND FL; *Social Skills Training

ABSTRACT

This study examined the effect of a social skills training intervention on the behavior of 18 noncompliant second graders who exhibited poor study skills and experienced academic failure. Teachers selected students for intervention and rated them on the Achenbach Child Behavior Checklist before and after the intervention. Pre- and post-test measures of the number of disciplinary offenses, task completion, and academic performance were also taken for each student. Project KIND (Keeping Interfering Noncompliance Down) was implemented over an 8-week period. The project was designed to improve children's social skills by teaching them to resolve conflicts by means of problem-solving skills that did not involve the abuse of others. The program also taught children to understand the connection between their behavior and its consequences. This was done by giving children immediate feedback on their behavior and using role playing and group story activities. A comparison of pre- and post-test measures indicated that, after the intervention, students' study skills improved and their academic achievement increased. Children also exhibited considerable improvement in the categories of anxiety, immaturity, unpopularity, hostility, aggressiveness, delinquency, inattention, and hyperactivity. A reference list of more than 80 items is included. (BC)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

X This document has been reproduced as received from the person or organization originating it.

☐ Minor changes have been made to improve reproduction quality.

• Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

ED338422

PROJECT KIND (KEEPING INTERFERING NONCOMPLIANCE DOWN)
A SOCIAL SKILLS TRAINING PROGRAM
FOR NONCOMPLIANT PRIMARY STUDENTS

Janice Masters
Cluster 35

"PERMISSION TO REPRODUCE THIS MATERIAL HAS BEEN GRANTED BY

Janice Masters

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)."

PS 020025

A Practicum I Report Presented to the ED.D. Program
in Early and Middle Childhood
in Partial Fulfillment of the Requirements
for the Degree of Doctor of Education

NOVA UNIVERSITY
1991

BEST COPY AVAILABLE

AUG 13 1991

PRACTICUM APPROVAL SHEET

This practicum took place as described.

Verifier: Kenneth Foyder
Ken Foyder

Principal
Title

7347 N. Genesee Road, Genesee, Michigan

June 6, 1991
Date

This practicum report was submitted by Janice Masters under the direction of the adviser listed below. It was submitted to the Ed. D. Program in Early and Middle Childhood and approved in partial fulfillment of the requirements for the degree of Doctor of Education at Nova University.

Approved:

7-27-91
Date of Final Approval of Report

Polly Peterson Ph.D.
Polly Peterson Ph.D., Adviser

ACKNOWLEDGMENTS

The writer foremost acknowledges Dr. Polly Peterson, superb practicum advisor and magnificent mentor, who provided never-ending positive encouragement and helped shepherd the practicum along on its journey to success.

Enormous appreciation is expressed to the dedicated school staff who made this practicum possible and successful.

The emotional commitment of a husband's love is woven into every word of this practicum report. Lloyd's understanding as the writer trekked through many a storm gave the energy necessary to venture forward.

And, lastly, the practicum would have not traveled far without the esprit de corps of the children.

TABLE OF CONTENTS

Page

ACKNOWLEDGEMENT.....iii

TABLE OF CONTENTS.....iv

LIST OF FIGURES.....vi

ABSTRACT.....vii

Chapter

I INTRODUCTION.....1

Description of Work Setting and Community.....1
Writer's Work Setting and Role.....3

II STUDY OF THE PROBLEM.....9
Problem Description.....9
Problem Documentation.....10
Causative Analysis.....14
Relationship of the Problem to the Literature....18

III ANTICIPATED OUTCOMES AND EVALUATION INSTRUMENTS.....28

Goals and Expectations.....28
Behavioral Objectives.....30
Measurement of Objectives.....33

IV SOLUTION STRATEGIES.....35

Discussion and Evaluation of Solutions.....35
Description of Selected Solution.....39
Report of Action Taken.....47

V RESULTS, DISCUSSION AND RECOMMENDATIONS.....52

Results.....52
Discussion.....64
Recommendations.....73
Dissemination.....74

REFERENCES.....75

LIST OF FIGURES

Figure

1 Juxtaposition of Practicum's Design.....30

2 Objective Number One.....30

3 Objective Number Two.....31

4 Practicum Model Plan.....32

5 Anxiety.....56

6 Immaturity.....57

7 Unpopularity.....58

8 Hostility.....58

9 Aggressivity.....60

10 Delinquency.....61

11 Inattentiveness.....62

12 Hyperactivity.....63

ABSTRACT

PROJECT KIND (KEEPING INTERFERING NONCOMPLIANCE DOWN) A SOCIAL SKILLS TRAINING PROGRAM FOR NONCOMPLIANT PRIMARY STUDENTS. Masters, Janice., 1991: Practicum I Report, Nova University, Ed.D. Program in Early and Middle Childhood. Descriptors: Adaptive Behavior/ Alienation/ Conformity/ Interpersonal Competence/ Social Development/ Social Influence/ Social Isolation/ Social Problems/ Social Skills Training.

The practicum addressed the need of improving noncompliant, oppositional, defiant, undersocialized, primary-aged, at-risk students' social skills. They exhibited poor study habits, academic failure, and were subsequent prime candidates of early school departures.

Project KIND, a weekly social skills training program, was designed and developed by the writer to help students acquire socially acceptable behaviors. Its focus aimed at helping them acquire conflict resolution tools by developing problem solving and decision making skills that included anticipatory outcomes and/or consequences. Improved social adjustment embodied the concept of solving problems without physically or verbally abusing others.

The 18 students were selected by their second grade teachers who completed behavioral checklists, a pretest and a post test, for each student. Documentation included comparing the post test percentile rankings with the pretest, observations, decreased number of disciplinary offenses, task completion and increased academic proficiency.

The outcome of the practicum was that all of the 18 students who were equally divided into Groups, A and B, made notable gains in their social adjustment. As a result the students' work study skills improved and their academic achievement increased.

Permission Statement

As a student in the Ed.D. Program in Early and middle Childhood, i do (X) do ( ) give permission to Nova University to distribute copies of this practicum report on request from interested individuals. It is my understanding that Nova University will not charge for this dissemination except to cover the costs of microfiching, handling, and mailing of the materials.

Janice Masters — Aug 10, 1991

(signature) (date)

CHAPTER I

INTRODUCTION

Description of Work Setting Community Setting

In a midwestern township located 12 miles from the heart of an industrial city, there is a spiraling village with a populace of nearly five thousand. It has become a bedroom community for the many people who work at the nearby mega-manufacturing corporation and its many subsidiaries. In the process of closing some of the area's factories, chronic lay-offs were uneventful. During the interim, the more fortunate were reassigned to other sites while others faced ad infinitum unemployment. The latter, in a high technological society, were likely the under-skilled employees who became the jobless victims buried in debt.

In retrospect, this community was reminiscent of an insignificant yet quaint crossroad-village with an interspersed clustering of homes circling its perimeter. The earliest residents recalled having only the police and fire departments which were under the auspices of the township, a small protestant church, and a kindergarten-12 grade class D school. Since the construction boom of two shopping malls by a single site developer, the community has never been the same. The post office, on the other hand,

has remained unchanged in that no mail still is not delivered to residents or businesses within the village limits.

Within an ever-expanding real estate market and subsequent population explosion came the coffee and donut shop, a restaurant, a hardware and insurance agency. A supermarket, pharmacy, dime store, dry cleaners, laundromat, beauty parlour, flower shoppe, video rental store, and a discount merchandise mart followed. Arriving from a now moderately populated five mile radius, the shoppers have created expanding sales opportunities to new and old businesses alike.

The site developer, an entrepreneur, known as the town mogul, has converted surrounding vacant land into two enormous mobile parks as well as apartment and condominium properties. His expansion of rental properties has invited into the community a more transient type of family. The renters who seem to be either low income or unemployed individuals may or may not be receiving general assistance. A ubiquitous societal problem, it should not be considered particularly indigenous to this community.

Especially during the summer months, a newly developed and expanding popular tourist attraction draws many visitors into the area; thus, creating a highly lucrative profit revenue for most of the local business owners. A reciprocal dependency has manifested itself in the responsibility and commitment they share among themselves. To have maintained

their successes and stayed current in the business arena, they have analyzed the market trends carefully and are subsequently willing to adjust accordingly.

Writer's Work Setting and Role

The school district is unique in that it has maintained its autonomy even though there were ambitions by some of the students' parents to annex with a larger adjacent school. For some bigger is better. In this case, this was not necessarily so. Its students ranked third in the county for their academic achievement. In spite of its smallness, the school is amazingly progressive and sophisticated. It is, therefore, no surprise that it has been well supported by the community. Over the past ten years, voter confidence is well documented by their passing of new and/or renewable school millages.

Mandated by the state is the fourth Friday count. The certified number of k-12 students is used in a formula that determines the amount of state aid schools will receive for the year. With a 1990-1991 total school population of 894 pupils, this school received an 11% increment.

The elementary building with 494 pupils houses a Head Start center, a young fives preschool program, a half day kindergarten, a transitional first grade, two special education full time basic classrooms, and the traditional grades one through six. It has a full time principal who supervises the 27 teachers. Under his administration are

the two reading specialists, the librarian, and the three teachers who are in charge of the music, band, and physical education programs. The latter four are shared with the high school.

The Head Start program is a division of the State's department of social services. The teacher was hired by the county administrator who directs and supervises the program. Its classroom space is being rented from the school by the local DSS.

The special education department's coordinator who is also one of the two remedial reading teachers, supervises the four teacher consultants, one speech and language pathologist, and the two remedial reading teachers. The two school social workers are employees of the county's Intermediate School District (ISD). The local school contracts for their services through the ISD.

A male and a female (the writer) social worker team together to co-facilitate school-based children's support groups. This unique school social worker intervention was unparalleled elsewhere in the county.

Since November of 1988, the aforementioned school social workers have co-facilitated children's support groups. They had worked in each other's assigned districts giving equal time to each. Since the 1990-1991 school year the writer's colleague became a part of the school's ancillary staff.

The school social worker's role is to service special

education children. This includes assessing special education candidates who are suspected of emotional impairments, consultative service with school personnel regarding the students, networking home and school with parent contacts, and working as a liaison with community resources as well as providing treatment to certified special education students in the school setting.

The State Department of Special Education allocates the funding for the school social worker service. There were no appropriated funds from the State's general education school budget for general education students to receive school social worker service. This meant that in order to legally serve any nonspecial education pupil, funding for the service had to come from either the local school district's own general fund or from private agency grants.

The budget which legitimated and financed the practicum program was through the efforts of the two social workers who drafted and submitted the grant proposal for the school district. It was the approval and funding that made this practicum's preventative work with nonspecial education children possible.

Unlike many social workers found in the schools today, the writer held a permanent k-8 teaching certificate. Over a nine year period of time, her experience included teaching kindergarten, second, third, and fifth grades. Prior to a permanent teaching contract, the writer recounted an

extraordinary two years spent substitute teaching in all kindergarten through eighth grades. This tenure included several assignments in country schools with K-8 grades in one room schoolhouse settings. Althoug they no longer exist in this area, the invaluable repertoire of memorable experiences still do. Substituting in the junior high school's seventh and eight grades back then compares to today's fifth, sixth, and seventh grades. While the former students were more child-like, the students from the latter group now imitate sophisticated 16-18 year old behaviors.

The relationship of being an elementary teacher and, then later, a social worker has provided incremental knowledge over the past thirty years and unquestionably has affected her understanding of the growth and development of children.

The school social worker, the writer, who has been assigned to this district since 1975, knows and understands the community well. She has experienced first hand the social changes that new community growth brings.

The writer is a team member of the Student Assistant Program (SAP) which was funded at both the federal and state levels and a component of the State's school improvement plan. The SAP's goal is to assist at-risk students in experiencing positive school programs. She has completed the required 60 hours of basic training and the advanced facilitator training.

The writer co-facilitates time limited groups for

children of separated and divorced children. In addition, she works individually in small and large groups which includes visiting classrooms and working with the entire class. The goals are general. They specifically embrace helping students strengthen their egos by increasing their self-esteem, self-awareness, and self-confidence. Occasionally there will be a trauma, for example, resulting from the death of a sibling in which case the focus will address the student's feelings of guilt, loss, and grief, etc. Some of the themes are prevention-oriented and include interrupting sexual or physical abuse and/or alcohol-drug usage. Periodically the writer provides support on a one-on-one basis with students who are having serious personal problems involving highly confidential manners that are inappropriate to share in a group setting.

The targeted population for the practicum represented a selection of at-risk children from the three second grades with a total enrollment of 74 students. Of them, 53% or 44 were designated seven, eight, or nine year old at-risk students who did not live with both biological parents. Thirty-two or 73% of the identified 44 students resided in either mobile home park or older apartment building.

Of the 44, all lived in one parent and/or reconstituted families. The latter comprised categories of parents and stepparents or parents and their live-in friend of the opposite sex.

High at-risk students are frequently victims of poverty

and in this representation, 39% of the 44 second graders received free lunches. The majority of these students arrived at school with severe dysfunctional home environments. For example, most of their parents suffered the effects of unemployment, substance abuse, violence, separation and/or divorce.

CHAPTER II

STUDY OF THE PROBLEM

Problem Description

Forehand and McMahon (1981) maintained that while noncompliance seemed to be a liberal term that described any deviant behavior, it specifically is defined as a behavior evoked when an individual "refuses to initiate or complete a request made by another individual." (p.2). Noncompliant youngsters manifest behaviors that indicate that they are angry, aggressive, seditious, combative, depressed, disrespectful, manipulative, passive-aggressive, and passive-resistive children. Additionally, they exhibit poor study habits, task incompletion, poor concentration, academic failure, preoccupation, exhibitionism, seductiveness, self-centeredness and hyperactivity. Any combination of these behaviors severely interferes with the students' overall general functioning, threatens their chance of completing school, and limits their opportunity for becoming productive adults. How sad it is that their academic achievement progress is severely depressed and even sadder that they fail at discovering the intrinsic enjoyment and satisfaction in the learning process.

It is, therefore, understandably, becoming extremely

exhausting for teachers without behavioral management skills to cope with such complicated behaviors. For them to harness such severe defiant, disruptive, and maladaptive behaviors which characterize a growing number of young, primary-aged children and still be held accountable for teaching them to read, write, and calculate (Gross, 1987) is virtually an impossibility. Sadly, many noncompliant students as they follow in the footsteps of the underachievers, misfits, and habitual troublemakers are forever lost. These identified students are without a doubt our prime at-risk children.

Problem Documentation

Of the targeted population, 44 of the 74 second graders were at-risk students. The class composition was heterogeneous. Grade retention had affected thirteen students once and two pupils twice. On the California Mental Maturity Test, 32 children tested in the average or higher range of intellectual functioning. The students who fell within the low average range of mental ability numbered 27. There were two pupils with borderline intelligence and one child was educable mentally impaired (EMI). While this student was screened into a full time special education basic classroom, she was being mainstreamed into her regular education classroom for all nonacademic activities which broadened her opportunities to socialize with her peers and they with her. There were six certified learning impaired

(LD) students who received individual academic programming in the special education resource room. The students in the remedial reading pull-out program numbered 26.

Unable to focus on academic tasks being presented, the identified 44 undersocialized, noncompliant, socially maladaptive students were culturally as well as economically disadvantaged. According to the school CA-60 records, they did poorly on achievement testing and received below average grades. This indicated that social maladjustment was the probable associated contributing factor that linked the secondary problems of depressed academic achievement to their school failure.

Another significant variable of the target population affecting their performance in school was absenteeism. They reflected a 28% higher rate of absenteeism compared to their peers' attendance. Three of the 44 children exhibited chronic nonattendance. They were high at-risk of advancing truancy and projected as future school drop-outs. The students' absences appeared in part to be contingent upon parental responsibility. Concomitant with absenteeism was tardiness.

A recurring pattern of either intermittent absenteeism or morning tardiness developed. It implied that the parent was not awake and/or uninvolved with the school readiness ritual which often forced premature and precocious commitments onto the child. In a home where there were two or more children, the oldest sibling in the family would

normally assume a surrogate role.

One of the identified 44 students, habitually missed the bus and arrived at school later than the others. On a near-daily basis, this student was continually overdue ten minutes or as much as two hours.

Of the target population, all 44 lived with disengaged parents who were single, separated, divorced, and/or remarried. Three children had lost a parent through death. Eight sets of biological parents had never married. One of the eight mothers had three children, each of whom had a different biological father. Over half of the parents were remarried. Eight parents had been twice divorced. One mother of 25 years of age was marrying for the third time. Nearly half of the children lived in reconstituted families with any combination of step-siblings, half-brothers and half-sisters.

Two-thirds of the identified socially depressed, noncompliant second grade students were children of parents who were themselves victims of poverty. The impetus of its vicious cycle encircles family disruption, teenage pregnancy, illiteracy, unemployment, crime, mental illness, substance abuse, violence, and divorce. Impoverishment is, thus, perpetuated by the revolving orbit of stress, deprivation, and depletion.

All of these identified students lived with parents who to some degree were discontent and dysfunctional as a result of stress. All manifested mild-to-severe symptoms of stress

characteristic of depression. In in all cases except three, their symptoms of a reactive depressive disorder were contingent upon their lower socioeconomic status. Without career training, they felt forever trapped at or below the poverty line.

As described by school personnel, there were at least two parents who appeared to be borderline personalities (APA. DSM-III-R, 1987) characteristic of irresponsibility, manipulative behaviors, poor impulse control, and dependency. Two parents who were repeated felons exhibited the clinical signs of sociopathy (APA, DSM-III-R, 1987).

Children from dysfunctional families transfer from home to school their prevailing and overwhelming problems. Their preoccupation of uncertainty diverts them from concentrating on academic achievement.

In order to address the students' affective domain, educators must play many roles. Thus, a responsive teacher becomes the children's parent, friend, guardian angel, nurse, counselor, social worker, disciplinarian, judge, and enforcer. In order to be academically competent, teachers know that a child foremost needs to develop a positive self-image, and exhibit self-confidence.

Many teachers become frustrated, overwhelmed, and discouraged when dealing with undersocialized and undisciplined students who have irresponsible and uninvolved parents. They are inclined to burn-out and may wish to leave teaching. If they stay, they tend to deny the

affective needs of children, become uninvolved, and unsympathetically confine themselves to the academic environs of teaching which may actually have harmful effects on their students.

Causative Analysis

Ramsey and Patterson (1989) felt that teachers who lack skills in behavioral training are unprepared to successfully cope with noncompliant, aggressively acting-out students. In their study, they reported that the teachers at the primary elementary grade level were encountering teacher abuse from two and sometimes three out of every ten students. Statistically, prone to be boys, they described these students who blurted-out, interrupted, disrupted, disobeyed and who were overfocused as being severely undersocialized and out-of-control. The results of their study concluded that conventional methods of classroom management failed to bring this group of targeted children under control.

Comer (1987) contended that the problem was in teacher training since many teachers are unable to address the predicament of the family and its impact on the learning. He believed that "teachers need to understand that the children are developmental in nature with differentiating overall functioning and not isolated robots whose functions are predetermined almost exclusively by their innate intelligence and willingness to comply." (p.7). Schools, he

maintained, need to promote a school-relationship environment that advocates and fosters developmental learning.

Some of the elementary teachers in the school district where the practicum was conducted, claimed that while they wanted to be more developmental in their approach to teaching children by gearing the curriculum at the student's success level, most continued to be academically focused and failed to embrace the learning needs of the target population. And, in general, most of the teachers did not understand the sociological or psychological implications and ramifications of the identified problem children.

The National Commission on Excellence in Education (NCEE) is currently the most prominent catalyst in gaining a mandate for education reform. Its infamous report, A NATION AT RISK, is causing schools to re-evaluate their school curricula (Hlebowitsh, 1990). Teachers, according to Bannach (1990), subsequently, experience a paradoxical problem when they are expected to raise achievement scores to substantiate their accountability. He believes that this is what too often interferes with the more appropriate developmental and affective education programs. With the pressure of school reform mandating strident standards, he perceives the problem of increasing student achievement to be in direct conflict with helping at-risk students stay in school.

Lawrence Cremin (1989) cited that American schools

face a crisis of trying to balance a variety of demands that the taxpayers have made on them and discussed the tendency to turn to the schools for solutions to social problems. This places an immense responsibility upon them and positions them at the center of emotionally charged controversies. In addition to being in the business of educating children, Stern (1987) noted that schools are subsequently expected to assist at-risk students by designing programs to prevent early school departure, illiteracy, teenage pregnancy, and substance abuse. In the Michigan Association for School Boards Journal (April, 1990) an unidentified staff writer referred to schools as becoming "pressure cookers and questioned whether they can stand up to the heat" (p.10). This writer alluded to the expectations "that schools must feed students, protect them from abuse, keep them in school, fight substance abuse, furnish after school day care, involve parents, provide medical and social services, educate adults, and institute continuing professional growth and education for its staff members" (p. 10).

Because educators do not understand the concept of poverty (Comer, 1987; Stern, 1987) nor its ramifications (Bulter 1989; Dimidjian, 1989), they fail the students. School personnel working with children must be able to understand that depressed social skills are a link in poverty's chain. Educators according to Dimidjian (1989) and Stern (1987) need to learn how poverty connects the

loops of low motivation, school dropouts, substance abuse, and truancy. Glasser (1990) identified the need for teacher training to include college courses that will permit educators to understand deprivation's inundated impact on the student's learning. Teachers need to develop skills that will enlighten them to look at the extent poverty influences the noncompliant, socially maladjusted student's overall social relationships (Comer, 1987; Shane, 1989).

Since the teachers received their teacher training 10 to 30 years ago, most were not skilled in behavioral modification and had not taken course work in current sociological problems. The writer's philosophy is that teachers are facilitators, student advocates, and mentors who inspire and encourage learning. This perspective is passionately distinctive from a class of teachers who view students as being in school for them to teach. In agreement with others, the writer also believes that it is not the children who have failed their teachers; it is, on the other hand, the teachers who had failed their students. This principle is truly very difficult to sustain when unruly students do not want to come to school and work nor care about learning. When noncompliant children sabotage the teacher's teaching and the other student's learning, the teachers regrettably admit that they cannot successfully meet their educational planning goals and objectives. Regardless of how individualized they may be, they simply are spending too much of their time endeavoring

to control them. They lament, are we educators or babysitters?

The target population of this practicum was a group of developmentally immature, socially disadvantaged, deprived and, subsequently, underachieving children. Their depressed social skills and noncompliant behaviors had become barriers to their learning in the traditional classroom setting. The school curriculum which was not developmental in design replicated a traditional program paradigm with a syllabus that emphasized the students' mastery of academic skills. In effect, the educational program which did not focus on individualized student learning failed to adapt to the targeted students' overall general functioning level.

Since these children were not being taught appropriate social skills at home, one concluded that as important as mastering the "3-Rs" may be, learning academic skills are secondary to helping children acquire acceptable social behaviors. At this time, the school does not incorporate social skills training into the curricula.

Relationship of the Problem to the Literature

Information obtained from recent professional journals suggested that noncompliant behaviors among young children which was cited in the 80's was fast becoming a prevalent problem for teachers to contend with. According to Kazan (1987), rambunctious, oppositional defiant behavioral patterns were becoming more commonly exhibited by

school children who statistically were being referred to community mental health centers and/or to probate courts in increased numbers.

The ramifications of this disorder appear to be its intensity that precipitates further pscychological problems. In 1981, Forehand and McMahon warned of the residual effects originating from this behavioral-social maladjustment. When unabetted, they cautioned, adolescents and adults have serious social problems. Without early treatment, they added, the patterns are generally irreversible by late adolescence.

Forehand and McMahon (1981) believed that the major cause of social maladjustment begins with the formulation parent-child conflicts. They contended that the major developmental and experiential factors contributing to "the forging of the parent-child conflict are cast long before children reach their sixth birthday" (p. 2-3).

Problems with authority that are launched in the home environment are shuttled to the school milieu, then travel back and forth, and finally, omnipresent wherever the child goes. Students with severe control problems often manifested in noncompliant behaviors concomitant with insufficient social skills fail to integrate the intrinsic enjoyment and satisfaction that learning brings.

Baker and Sansone (1990) alerted that at-risk students whose achievement is often below their age expectancy as measured by standardized tests, viz. the WRAT-R, the

Brigance, and the Woodcock-Johnson are candidates for an early retirement from school. According to them as well as Butler (1989) and DeBlois (1989), the students who exhibit nonmotivating behaviors, who find little satisfaction in the learning process, and who fail to achieve are eminently at-risk of ever experiencing a healthy, normal, and quality life. Many authorities (Weiss & Hechtman, 1986; Ross & Ross, 1982; Barkley, 1981, 1990; Kinsbourne & Caplan, 1979; & Wender, 1972) believe that noncompliance is the major problem manifested by hyperactive children diagnosed with attention deficient hyperactivity disorder (ADHD) and that it is not uncommon, although less frequent, to be exhibited by attention deficit disordered (ADD) students (APA, DSM-III-R, 1987).

Rist (1990) described crack babies as "shadow children" who were fetally exposed to cocaine. While they can be severely withdrawn, she described others as being out-of-control, explosive, and worse than hyperactive students. The mild, moderate, or severe condition of their dysfunctioning will likely determinine whether these children are placed in general or special education. One thing is certain and, that is, these youngsters are coming to school and they will be obligated to meet their educational needs.

Socially maladjusted students who exhibit noncompliance do not develop normal relationships patterns (El-Sheikh, Cummings, Goetsch, & Coping 1989; Kaufamn &

Cicchetti, 1989), subsequently, they rarely experience positive interpersonal relationships among others. These identified students are socially deprived and their repertoire of an experiential background is limited (Dimidjian, 1989) compared to their peers who are socially adjusted.

At-risk, noncomplying students who are likely not to be accepted by their complying peers in the school setting do not tolerate their rejection. Rulh (1982) described them as unpredictable, potentially hazardous students who when provoked could endanger them; thus, this created a sub-group of "at-risk" children who required protection. In the meantime, Ruhl cautioned that aggressive students will necessitate supervision in a tighter structured milieu if their violence is to be kept under control.

Dimidjian (1989), Cahoon (1988), Star (1980) as well as Wang, Haertel and Walberg (1990) all agreed that parental modeling of violence is replicated generationally. Cahoon; Cairns, Cairns, Neckerman, Ferguson and Gariepy (1989) acknowledge the problems that these angry-assaultive students coming to school bring. They described them as learning violent-abusive behaviors from their neighborhood peers who originate from communities where formation of youth gangs sanction combative-assaultive behaviors.

Clark-Stewart (1989) discussed the issues surrounding single-parent families. It was her impression that many of these children are raising themselves and being more

influenced by their peers and less by their parents. She also noted that when single parents are working, which is often the case, they become overwhelmed with responsibilities. With feelings of hopelessness and helplessness, their energy level is depleted to such a degree that it affects how much time they will share with their children.

Before academic learning can take place, Howing, Kurtz and Gaudin (1990) contended that these students needed to be taught that physical abuse and violence are violations and unacceptable behaviors. If students are to take their place in a working-together-world and make it a better place to live in, they need to learn how to diffuse their anger and how altercations can be solved through mediation (Cahoon, 1988; Kostermol, 1989; Roderick, 1988).

From observing the behavior and peer interaction of young children, Ladd (1990) could predict their social adjustment. He believed that they, even kindergartners, can be taught to make and keep friendships with their school mates. The writer agreed with Lovins (1980), Johnson (1990) and Rose (1986) who believed that children can be taught didactically positive social skills training through role playing, skits, and stories. When they are free to act-out their feelings, children begin to develop awareness which prepares them to accept change.

According to Reed & Sautter (1990) and Hymes (1989), the children who live in a milieu encompassing poverty,

family disruption, abuse, violence, and crime, were generally depressed. Some of the symptoms depressed youngsters manifest are anger, rage, irritability, aggravation, aggressivity, hyperactivity, and impulsivity (APA, DSM-III-R, 1987). Childhood depressive disorders travel from home to school and continue to commute back and forth.

Research gleaned from Barkley (1987, 1990), Chase and Thomas (1986), Dreikurs (1968), Gardner (1986), Gordon (1972), Patterson and Gullion (1971) believed that unhealthy communication systems in the home environment along with ineffectual parenting skills (Dreikurs, 1968; Kuczynski & Kochanski, 1990) contribute to the development of noncompliant behavioral patterns which grossly interfere with the learning process as well as their moral and social development. Lawrence Kohlberg's work, as it relates to children's moral development, stresses the importance of two and an half or three year old children learning right from wrong if cognitively ready (Nucci, 1987 and Thomas, 1985). Piaget theorized that children by the age of seven or eight years are able to comprehend the concept of rules and by ten or eleven years can reason moral issues (Wadsworth, 1989).

Many educational journals reflected that the increased number of noncompliant primary students are creating serious problems for teachers who do not know how to handle them. The most cited complaint voiced by teachers was that they have too many students in their classrooms (Robinson, 1990;

Tennessee Project Star Study, 1990; Tomlinson, 1988). According to their research, the most favorable effects of class size reductions occur in grades k-3. Their statistical data show that decreasing class size can improve economically disadvantaged students' academic achievement.

In general, teachers lack the skills (Comer, 1987) to modify severe behavioral disorders; teachers are trained to teach and are not mental health experts. He suggested that teacher training at the university level include much more sociology, counseling, and counseling course work.

Teachers fail, cited Catto (1990) to understand family mayhem. He pointed-out that schools do not understand what an impact family dysfunctioning has upon children's learning. Compas, Howell, Phares, Williams and Ledous (1990) discussed how parent-child stress reciprocity in a dysfunctioning family is highly contagious and damaging. They found that deteriorating family life obstructs children's emerging communication skills and prevents them from developing trusting and meaningful adult-peer relationships. These authors along with Warner and Craycraft (1990) and Valentine, Freeman, Acuff, and Andreas (1990) believed that educators can help at-risk children when they fully understand the concepts of family dynamics. This can only be broadened when teachers are given additional course work in sociology and psychology to include, for example, child-adolescent human growth and development, family dynamics, behavioral assessment, and

classroom management.

Teachers are pressured to prove their accountability which too often is measured, wrote Bannach, (1990) with their students' achievement test scores. Comer (1987) believed that too many teachers fail to teach the whole child. He viewed teachers as categorizing students according to their ability levels and teaching within these parameters instead of helping them become social successes. At-risk students would have a high failure rate since they require more individualized instruction. Unless the syllabus containing the grade's academic objectives or expected proficiencies is adjusted to the students' success level and further coordinated with their learning individual styles and rates, it will continue to perpetuate school failure for at-risk students. Noncompliant children, Sagor (1988) claims, are without a doubt the high at-risk who experience relentless school failure. Butler (1989) believes that students without a high school diploma are prey to the dinosaurs of unemployment, poverty, crime, alcoholism, and other drug addictions.

While the research indicated that oppositional, noncompliant children who live in dysfunctional families are often physically, sexually, emotionally, verbally, and/or emotionally abused, Butler (1989) maintained that an alarming rate of them evolve as abusive spouses (mates) and/or parents themselves. The implication for untreated at-risk noncompliant children, according to him, is

that they cost taxpayers additional revenue for mental health, corrective reform, welfare, and/or rehabilitation.

Unable to cope with acting-out, abusive, and noncompliant students a teacher's self-esteem is soon lowered (Bannach, 1990). Firing the impetus for increased teacher "burn-out" are reduced self-confidence coupled with a lowered ego state which trigger the deadly feelings of depression, powerlessness, and apathy (Stephenson, 1990). Some become so overwhelmed and disillusioned that schools run the risk of receiving resignations from their best teachers.

The literature review, in summary, exemplifies that unless school reform is implemented, the target population of at-risk students who exhibit noncompliant, oppositional, and defiant behaviors will multiply at a proliferated rate. Since social maladjustment significantly interferes with learning, it is likely that such children will experience school failure and be at-risk of completing high school. Without skills they unfortunately become inadequate employees, spouses, and parents.

By surrendering to welfare, drugs, and/or crime, too many parents have symbolized an inability to adequately function in today's high-tech society. Sometimes they are innocent victims who were captured by the dinosaurs of illness, unemployment, poverty, etc. To be expected, the corollary of these environments causes dysfunctioning family

life. Most at-risk children are by-products of parental disengagement and are found living in one-parent families where the parent's influence is often absent. While some of the children are left to fend for themselves, a great many are being raised by surrogates, like an older sibling with precocious parenting responsibilities or left to fend for themselves.

From out of this scenario, there emerges the undersocialized, angry, and needful children who are enrolled in school. Upon entrance, their presence is quickly felt. When provoked, these undersocialized, noncompliant, and hostile students torment and abuse their teachers and classmates unmercifully with an undersupply of respect, absence of fear, and lack of remorse.

Teachers who are not trained in behavioral management are completely dumbfounded as to how to control such rude, uninhibited, and malevolent children. Many do not understand family dynamics nor the implications of poverty. They are expected to teach students academic proficiency skills which have measurability and are assessed by the State's standardized achievement tests; thus, indicating both the students' and the teachers' competency. They do not understand that skill mastery is secondary to the student's social and emotional adjustment. Unless children behaviorally conform in the school setting and choose to learn, they can not possibly reach their maximum potential of academic proficiency.

CHAPTER III

ANTICIPATED OUTCOMES AND EVALUATION INSTRUMENTS

Goal and Expectations

The following goal projected for this practicum was for 18 identified\noncompliant second grade students to improve their social adjustment through a practicum design implemented in the school setting. To improve their overall social adjustment, these students who were selected by their teachers would learn how to better understand the kinds of behaviors that develop into social relationship problems, conflicts, dilemmas, predicaments, complications, and difficulties, etc. through Project KIND, a social skills group training program. Since creative and critical thinking prior to behavioral action can prevent many conflicts and difficulties, the students would use thinking tools to help them better analyze and understand their behavior as well as develop insight into why others behave in the way that they do. They would then be able to use logical reasoning as a tool to accurately anticipate behavioral consequences.

Strategies that are designed to help the students control their anger without resorting to verbal and/or physical abuse would be emphasized. These would include

conflict resolution skills, sequential thinking, and causal-effect analysis. Helping students develop appropriate social skills would indeed improve their relationships with peers, teachers, parents, and other individuals.

Project KIND concentrates on problem-solving without verbal, physical, and/or emotional abuse. Kind and helpful students are expected to solve their problems in a socially acceptable manner utilizing respect and courtesy.

When the students begin exhibiting diplomacy, respect, courtesy, and kindness to others, it would indicate improvement in their overall general social adjustment. Being able to express their angry feelings without verbally and/or physically hurting others supports the theory that noncompliant and/or oppositional students can successfully learn socially acceptable behaviors.

The students would be expected to ward off their anger by learning to avoid provocative situations. Although anger should not be suppressed, it can be handled without the loss of its control. They were to learn that they could not hurt others. They would learn to diffuse their anger by using newly learned conflict resolution thinking tools. By analyzing the causal-effect relationships as well as anticipating the consequences to problems, they would be able to exercise thinking strategies to resolve their difficulties, complications, predicaments, or dilemmas without verbally or physically hurting someone. Figure 1 depicts Objectives I and II juxtaposed to support the goal.

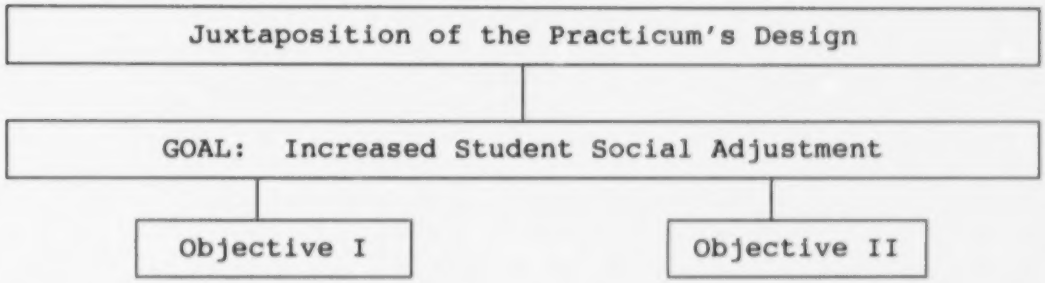

Figure 1. Increasing student social adjustment supported with objectives I and II was the practicum's anticipated goal.

Behavioral Objectives

The first objective projected for this practicum was for 18 identified noncompliant oppositionally defiant seven-to-nine year old second grade students to exhibit proficient study skills.

Objective Number One	
Behavior Expected:	The students were to exhibit proficient study skills within the school setting.
Assessment Instrument:	Achenbach Child Behavior Checklist - Teacher Rating Form (CBCL-TFR): a. Pre-test b. Post-test
Standard of Performance:	Comparative scores of the pre-test and post-test were to show at least a ten percent, based on the percentiles scores, improvement in one or more areas.

Figure 2. The first objective's expected behavior, its measurement, and performance standard.

Developing productive study habits included listening to directions, staying on the tasks, and task completion. In addition, they were to develop study habits, such as, focusing on tasks and task completion.

For 18 identified noncompliant seven-to-nine year old second grade students to improve their academic proficiency was the second objective projected for this practicum.

Objective Number Two	
Behavior Expected:	The students were to improve their academic performance.
Assessment Instrument:	Achenbach Child Behavior Checklist - Teacher Rating From (CBCL-TRF): a. Pre-test b. Post-test
Standard of Performance:	Comparative scores of the pre-test and post-test would show at least a ten percent improvement in one or more areas based upon the percentiles scores.

Figure 3. The second objective's expected behavior, measurement, and performance standard.

Since there is a relationship between the acquisition of suitable study habits and academic competency, the identified students were to change their non-productive energies into purposeful work habits that included remaining on-task, task completion, and task accuracy.

Compliance to their improvement was a guarantee for their improved academic achievement.

Figure 3 diagrams how Objective I (Improved Study Habits) and II (Improved Academic Achievement) would be measured. The Achenbach Child Behavior Checklist - Teacher Rating Form, a standardized evaluation checklist with normed ratings, was selected as the instrument of choice. It would be administered twice, as a pretest to establish the baseline for the comparative groups, A and B, and as a post test to determine whether the goal and objectives were met.

Practicum Model Plan

End Result	Evaluation Tool	Standard of Achievement
Displayed Appropriate Social Skills I. Controlled Anger II. Solved Problems III. Formulated Realistic Decisions IV. Showed Respect V. Used Courtesy	Achenbach (CBCL-TRF) Teacher Form I. Pre-Test II. Post Test	I. Exhibited Proficient Study Habits A. Sustained On-Task Behaviors B. Increased Accuracy II. Demonstrated Average or Above Average Proficiency in Academic Skills Geared at the Students' Individual Success Level.

Figure 3. The juxtaposition of the practicum's goal, tool of measurement, and outcome was depicted.

Measurement of Objectives

The evaluation instrument of choice, the Achenbach Child Behavior Checklist - Teacher Rating Form, (CBCL-TRF), (Achenbach & Edelbrock, 1986) found in the Ninth Mental Measurement Yearbook was highly rated by Grille (1985, Freeman (1985), Kelley (1985), as well as McConaughy and Ritter (1985). The checklist is available in three forms. Two forms, one for teachers and another for parents, provide behavioral data about the identified child. The completed checklist is computer scored and the accompanying printout delineates the normed percentile rankings in a graph form. Garnered from the teacher's viewpoint, this instrument identifies the student's problems and adaptive functioning in a standardized format (Achenbach & Edelbrock). The third form is a self-checklist for 11-17 year olds.

Pretesting and post-testing the 18 identified at-risk second grade students who were to be divided into two groups for comparative purposes with the Achenbach Child Behavior Checklist - Teacher Rating Form, (CBCL-TFR), (Achenbach & Edelbrock, 1986) would provide data to indicate the students' overall general functioning and substantiate whether the objectives were met.

The students' progress would be documented by observing and recording their improved academic-related behaviors. Presuming that the tasks were adjusted at the students' instructional and subsequent success levels, written records would verify the frequency of the students' task

completions. The recording process was felt to be a very reliable measurement. Further evidence would accrue when the students consistently increased their rate of academic accuracy.

CHAPTER IV

SOLUTION STRATEGY

Discussion and Evaluation of Solutions

Young children were disrupting the classrooms with their noncompliant behaviors. These students were social misfits and unable to behave in an acceptable manner. Their task refusal affected their school success.

Marsh and Holmes (1990) believed that before students can experience academic achievement and personal satisfaction, their inappropriate and/or unacceptable social behaviors required correction. According to Butler (1989), DeBlois (1989), Reed (1990), Sagor (1988) and Warner (1990), without self-esteem, self-confidence, and self-competency, school failure is given impetus to an early departure from school with its perils of accompanying unemployment, poverty, addiction, and/or crime. The outcome, they warned is the escalating cost of rehabilitation programs that the taxpayers will be obliged to support.

Severe verbal and physical abuse directed at teachers has been reported when these oppositional defiant students explode into rages and actually begin hurting their teachers (Barkley & Russell 1987; Cahoon, 1988; Kazdin, 1987). Noncompliant students with depressed social skills are

easily agitated and their anger escalates to such intensity that reasoning with them is not possible. According to Dobson (1978), these children who become so enraged are strong-willed youngsters who want what they want when they want it and can not delay gratification. He further described them as children who resent being told no and will do whatever they have to do to get what they want regardless of the negative consequences.

Johnson and Johnson (1990) believed that "interpersonal skills may be the set of skills most important to students' employability, productivity, and career success" (p. 32). They felt that children must learn to be effective communicators and this encompasses knowing how to solve problems and conflicts constructively. Howing, Wodarski, Kurtz, & Gaudein (1990), Ladd (1990) and Workman (1990) who have implemented social skills training programs involving defiant children with a history of abuse, established that social skills training helps students improve their behavioral self-control when they learn to use problem solving and decision-making techniques. These skills, the aforementioned authors contended, are what help students improve their overall social adjustment and social relationships with others.

Ideas of social skills training gleaned from well known authors, Barkley (1987), Becker (1971), Curwin & Mendler, (1988), Dinkmeyer & McKay (1982), Dobson (1978), Dreikurs (1968), Forehand and McMahon (1981), Fox, (1990), Gardner

(1979), Gordon (1970), McCarney and Bauer (1989), Patterson & Gullion (1971), Rettig & Paulson (1975), Russell (1987), Smith & Smith (1976) Toth (1990), Valett (1969), and Workman (1990), aimed at developing the students' insight; improving their affect; increasing their self-esteem, self-confidence, and self-competency; concomitant with helping improve their social relationships with others. Forehand and McMahan (1981) as well as Gross (1987) developed and initiated social rehabilitative training programs establishing that it helped noncompliant students reduce their oppositional behaviors. Students, according to Sagor (1988), needed to learn that it is their personal responsibility to recognize the cause and effect of their actions if they are to have behavioral self-control and socially acceptable behaviors.

While a behavior modification model (Gross, 1987; Kuczynski & Kochanska, 1990; Patterson & Gullion, 1971; Rettig & Paulson, 1975; Smith & Smith, 1976; & Valett, 1969; Workman, 1982) with its consistency, reinforces punishments and rewards, it is not to be chosen as a sole treatment method for oppositional and/or conduct disorder children. Dovetailed with any social-behavioral reformation program, it has its merits shaping and reinforcing desired behavioral changes.

Being the nice, kind, wonderful and accepting therapist who is nondirective in a client-centered (Rogers, 1951), an almost laissez-faire setting, and who utilizes the psychoanalytic principles hoping to establish a trusting

relationship (Reich, 1949) is not an acceptable treatment model to use with characteriologically depressed children. Experts like Barkley (1987), Forehand and McMahon (1981), Patterson and Ramsey (1989), agreed that the most effective model that helps these children develop acceptable social behaviors is the direct, confrontational approach.

Rational Emotive Therapy (RET) (Bard, 1990); Ellis & Grieger, 1986;), **Reality Therapy** (Glasser, 1965) and **Adlerian Theory** (Dinkmeyer, 1979 & 1982; Dreikurs, 1969) are not new models but, seem to impact upon conscienceless, acting-out children a desire to change their negative responses into more positive behaviors. Research studies (Cairns, Carins, Neckerman, Ferguson & Gariepy, 1989; Fabes, Fultz, Eisenberg, May-Plumlee & Christopher, 1989; Johnson & Johnson, 1990; Mize & Ladd, 1990; Sancilio & Hartup, 1989) as well as journals (Cahoon, 1988; Howing, Wodarski, Kurtz, Gaudin & 1990; Kostelnik & Stein, 1989; Nucci, 1987; Rose, 1986; Roderick, 1988; Sanchez & Anderson, 1990; Warner & Craycraft, 1990) provided data which confirm that some at-risk students are ameliorated through successful group social training skill programs. According to Dreikurs (1968) and Sagor (1988), children need to develop skills that enable them to identify the natural consequences that will result from their behavior (Dreikurs, 1968; Sagor, 1988). These at-risk students can be salvaged when accorded social skills training (Ehly & Dustin, 1989; Howing, Wodarski, Kurtz, & Gaudin, 1990; Johnson, 1990; Ladd, 1990;

Mize and Ladd, 1990; Rose, 1986). With this in mind, the group process was organized so that it focused upon helping children understand that there is a relationship between their behavior and the consequences that follows it (Ellis & Grieger, 1986).

Description of Selected Solution

There are a variety of solution strategies designed to help students increase their social skills. The practicum implementer chose a group social skills training model, Project KIND, designed to abate socially unacceptable and inappropriate school behaviors. KIND is an acronym for Keeping Interfering Noncompliance Down. The program, a social skills training program design, aimed at helping the students develop sequential thinking strategies and at teaching them to react and behave in a non-abusive, courteous, kind, and caring manner. The writer believes that when students are taught to use conventional social skills, they can exhibit more socially appropriate behaviors in the school environment, display improved study habits and concomitantly experience academic success. Thus, when noncompliant students begin to manifest socially appropriate behaviors and exhibit sufficient work habits, their academic proficiency skills are expected to significantly increase.

The acceptable social behaviors and appropriate study habits exhibited by the students were to be documented by recording the collected data. Direct observation by any

significant school personnel was to be written and recorded.

When the recorded number of times any student directed to the office because of noncompliance significantly decreased, the writer was led to believe that the wanted behaviors were obviously increasing and that the program was having a positive effect on that student. Social rehabilitation producing ameliorated school conduct and better study habits would also be reflected in the students' improved grades.

Further verification that Project Kind would successfully meet the criteria of the goal and objectives was to be found in the comparative normed ratings obtained from the Child Behavior Checklist - Teacher Rating Form, (CBCL-TRF), (Achenbach & Edelbrock, 1986) by comparing the normed behavioral rating mean scores obtained from the pretest baseline with the post test, a repeat of CBCL-TRF, eight weeks later.

The pretest procedure would involve having the teachers complete the individual behavior checklists for the 18 selected noncompliant students prior to the start of Project KIND. The completed checklists would be collected by the writer and computer scored. The normed percentile rankings of the students' individual profiles were to be presented on a graph. Two months later, the teachers would repeat the Child CBCL-TRF.

The individual students' CBCL-TRF post test percentiles

needed to be compared with their initial ratings. The expected outcome was that all of the students would exhibit overall general behavioral improvements in their classrooms. Ten students should indicate at least a 10% gain and the remaining eight would hopefully show a 20% increase in one behavioral category or more.

The identified 18 noncompliant second grade students who displayed little guilt (Ramsey & Patterson, 1989) nor reparation when they hurt someone or became behaviorally unmanageable were considered a real menace in the classroom. These undersocialized children rarely knew how to think through their thoughts and ideas. They just reacted to their feelings. They used very little control to stop and think before they acted. Did they feel sorry when they bumped into someone? Did one hear the words, please, thank-you, excuse me in their vocabularies? Did they answer yes instead of yeah? Were they concerned if they disrupted the class by not staying seated and exhibiting off-task behaviors? Did they realize that they were abusive to their teachers? Did they understand the serious consequences when their school progress reports reflected failure? Regrettably, the answer to each question was no.

What would work to help civilize these untamed, uncontrollable, behaviorally disordered students? Are the teachers really teaching or are they babysitting?

The writer believed that young children can be taught to become responsible for the choices they make. They can

learn to stop and think before acting. They can be self-directive students exercising self-control.

The improvement of a child's social skills needs to focus upon developing problem solving techniques that involve learning to think consequentially. These are techniques that emphasize conflict resolution thinking and cause and effect analyses. The students can learn in a school-based skills training program that emphasizes learning to think logically, systematically and sequentially.

Project KIND was to be divided into two social skills training groups to accommodate the target population of 18 noncompliant second grade students. Two therapists, trained at the masters' level and fully certified and licensed by the State co-facilitated Project KIND.

The program design was eclectic. Adapted for young children, the original content dovetailed with a composite of contemporary and traditional theories that mixed the concepts of rational emotive therapy (RET) (Ellis & Grieger, 1986), reality therapy (Glasser, 1965), adapted Adlerian theory (Dinkmeyer, 1979 & 1982; Dreikurs, 1969), and transactional analysis (TA) theory adapted for children (Berne, 1961; Masters, 1968).

The model was designed to help the students maximize their understanding of the connection between behavior and consequences. Project KIND, a social skills training program, focused upon conflict resolution, stress

management, causal and consequential thinking, as well as, problem solving and decision making practices. Since it was fundamentally reality based and insight oriented, it integrated confrontational techniques in order to assist the students to become responsible individuals with socially appropriate behaviors.

Social skills training involves giving immediate feedback (McCarney & Baruer, 1989; Patterson & Gullion, 1971; Rettig & Paulson, 1975) with regards to any inappropriate behaviors and positive behaviors. The program content was fashioned to use child-oriented metaphors and analogies that will help the students understand the concepts and increase their attentiveness. For example, students had a fruit salad party. Each student brought fruit from home and together helped prepare a giant salad. The mixing of the complementary fruit symbolized being different and, yet, getting along together in harmony.

To effect a greater impact on the children's understanding, the students role played, acted-out skits, and group-authored stories. Tactile, kinesthetic, concrete, and tangible articles and artifacts were given to the children to symbolize some of the basic principles of values or morals.

The social skills training Project KIND aimed at increasing the student's academic performance as a result of overall improved school social adjustment. Critical to the success of the program would be helping the students reduce

their unhealthy self-centered, narcissistic, and selfish traits. While students need self-esteem and self-confidence in order to increase their school achievement (Mize & Ladd, 1990), they also need to develop sensitivity and empathy for others if they are to manifest appropriate conduct in the school environment.

Project KIND was designed to be a time-limited social skills training program. KIND is an acronym which means: Keeping Interfering Noncompliance Down. To improve the identified noncompliant students' social skills, Project KIND, an intensive, school-based social skills training group, was projected for implementation.

In every classroom, the elementary teachers have identified between 10-20% of their students as manifesting noncompliant behaviors. The list of 18 second grade students selected for the social skill training group, known as Project KIND, was to be finalized after receiving written parental approval.

The writer, a female school social worker, along with a male social worker would co-facilitate the two groups. With the perspective that both male and female modeling would greatly influence the groups' successes, they felt they would have an optimal chance at conflict resolution (Walters, Papp, & Silverstein, 1988) by counterbalancing the children's defense mechanisms of projection and displacement when the expected gender differences would arise. For example, children who project or displace their anger on the

mother or father figure (Gardner, 1986, 1979; Reich, 1949) would be more applicable to work through their conflicts within the group setting with the presence and influence of both male and female co-therapists. The co-facilitators could offer a pseudo-family arena where they could portray appropriate role models. Since they would be able to reinforce each other in a positive manner, they would also be demonstrating amicable quasi-parental consistency.

With written parental permission video taping of the groups would be used as a teaching tool. The tapes would not only help the co-leaders evaluate their own work but, would provide the students an audio-visual opportunity to work through a variety of issues.

The practicum, Project KIND, is a model design of a school based social skills training group program. For the practicum's project, there would be 18 second graders who exhibited noncompliant behaviors. Chosen by their teachers to be group participates, they were to be divided into two groups of nine members each. Each was an intermingling of students from the three different second grade classrooms with a ratio of three boys for every girl in the nearest equitable distribution of the sexes.

To insure the start-to-finish continuity of membership, each group would have nine members instead of the original number of eight. Because of the high sporadic absenteeism these prime at-risk children exhibited, the groups with an additional member would operate more successfully with an

absence or two. Should a member move-out of the district, the loss would not severely disrupt the group's balance.

The groups were to meet 45 minutes once a week for eight times. They would rendezvous in the school social workers' carpeted room where there is a round table with chairs. There were several large-sized bean bag cushions which attracted added comfort and relaxation. The dimmed lighting and the faintly heard background classical or semi-classical music set a quiet mood and created a peaceful atmosphere.

The co-facilitators/ co-therapists would be able to constructively evaluate the content, process, and progress of the groups after each session. They would be afforded the advantage to critique each other as well as plan new strategies for the upcoming sessions.

The practicum practitioner made plans to maintain a journal where notes after each session would to be recorded. Each week, the social workers would arrange to be in the students' classrooms to observe their behavior, reinforce desired social and/or study behaviors, and correct inappropriate behaviors as they appeared. At that time, behavior modification techniques could be suggested and demonstrated for the teachers and teacher aides to adopt and implement.

Upon request, the social workers would provide consultative services prior to the groups' sessions to the school's staff. Short written memos from the teachers or

other school personnel informing the co-facilitators of any pertinent information was believed to be the most efficient use of their limited time.

Upon the eighth week, the group members who made significant improvements would graduate, receive a certificate of merit, and a poster of choice. To celebrate the groups' success, the students will choose and organize a party such as an outdoor barbecue or pizza pizzazz.

The concept program's organizational structure is a group-within-a-group design. After the final session, it may be beneficial for some students to repeat the eight week time limited intensive training program. Any student who would want to repeat the former group would that option. Others may choose to continue in a less structured ongoing support group which would continue to reinforce the use of thinking strategies that helps students resolve conflicts.

When the support group reconvenes in September, a second eight week time-limited support group with new students replicating the first social skills training group would begin later in the fall. A third support group projected for the late fall is planned to accommodate the overflow of students completing the intensive eight week program.

Report of Action Taken

After a mini-inservice was presented to the involved teachers and aides, the social skills training group,

Project KIND, was ready to implement. In addition to addressing the groups' goal and objectives, the school social worker allowed time for any concerns or questions to be explained. At that time, the introduction of the pre-testing and post-testing evaluation plan and explanation of the Child Behavior Checklist - Teacher Rating Form (CBCL-TRF), (Achenbach & Edelbrock, 1986) was covered. The parent permission forms were presented, clarified, and disseminated at the close of the presentation. The form, in addition to the yes box to be checked for student group participation, included yes and no boxes for the parents to indicate if they would permit video taping of their child in the group sessions and/or if they wished to schedule an individual parent conference with the social workers.

The social workers collected the returned permission forms signed by the parents from the teachers. The students were identified by the teachers who tried to group them according to those with written permissions permitting video taping from those which were not approved and according to their students' available free time from other pull-out programs. The group compositions were discussed with the teacher and principal. There were 18 students chosen and divided into two groups. The gender ratio was 3:1 with the boys outnumbering the girls.

Video taping was decided not to be used since any group of nine students whose parents permitted it would not crystallize into a viable composition.

After the teachers selected the 18 students, the social worker reintroduced the Achenbach Child Behavior Checklist - Teacher Rating Form (CBCL-TRF), (Achenbach & Edelbrock, 1986) to the teachers requesting that they complete the pre-testing process using the checklists for the students in their classrooms. After the checklist was computer scored and profiled on a graph, the school social worker discussed with the child's classroom teacher what the results indicated.

Although not incorporated into the practicum goal or its objectives, the implementor acknowledged the importance of parental involvement. To any parent interested, the school social worker further addressed the purpose of the group, its goal, the objectives, and its format as well as answered any of their questions. To reinforce the objectives that the children exhibit appropriate social skills and improve their study habits, the school social worker awarded every option to gain parental support. The time set aside to meet with parents insured the social worker's accessibility. To offer times most convenient for the parents, they could elect a morning or an afternoon appointment. When necessary, an evening schedule was offered in an effort to avoid having parents lose pay from lost work. A parent conference could also be initiated by the social worker.

Targeting a segment of the groups' population, there were students suspected of having ADHD (Attention Deficit

Hyperactivity Disorder) (American Psychiatric Association (DSM-III-R), 1987). The social worker was particularly concerned about the children who exhibited ADD/+H+ODD (Attention Deficit Disorder plus Hyperactivity plus Opposition Defiant Disorder) (Barkley, 1990). After discussing the student's symptomatology with the parent(s), the social worker suggested a medical review to rule-out ADHD (Attention Deficit Hyperactivity Disorder) and/or a mood disorder, such as, depressive disorder or cyclothymia (American Psychiatric Association (DSM-III-R), 1987). In children, the latter, a milder form, was felt to be more common than a manic-depressive disorder (American Psychiatric Association, DSM-III-R, 1978). In addition, the social worker provided the parent with literature expressly written for parents with children who exhibit ADHD, ADD, or childhood depression reactions (American Psychiatric Association, DSM-R-III, 1987). Some parents were asked to complete the parent Achenbach Behavior Checklist. Any completed parent checklist was computer scored and compared to the results of the behavior checklist completed by the teacher.

For those children scheduled for medical reviews, the social worker presented the parent with a data portfolio which contained the Achenbach results, the Conners Teacher Rating Scale-Revised (CTRS-R) (Conners, 1989), the Acters Profile (Ullmann, Sleator & Sprague, 1988) and short narratives that described the student's school behavior

written by the teacher and the social worker that were to be presented to the physician. When appropriate, the school social worker acted act as a liaison for the home, school and physician.

At the end of the eighth week, the parents were contacted to make arrangements to review their child's progress. If the parents completed the Child Behavior Checklist - Parent Rating Form (CBCL-PRF), (Achenbach & Edelbrock, 1988), they were asked to repeat a second one at this time. The data collectiots shared with the parents included all of the results accrued from the Achenbach behavior checklists (CBCL-PRFs and CBCL-TRFs), (Achenbach & Edelbrock).

When the parents elected to complete the Achenbach parent forms, the results from their assistance increased the reliability of the portfolio's comparative data. This documentation, subsequently, served to further substantiate Project KIND's objectives.

CHAPTER V

RESULTS, DISCUSSIONS AND RECOMMENDATIONS

Results

As high as 20 percent of primary-aged, undersocialized and nonconforming students were disrupting the classrooms. The goal for this practicum was for a targeted population of 18 second grade children to exhibit appropriate social skills. To improve the students' study habits and advance their academic proficiency became the objectives of Project KIND (Keeping Interfering Noncompliance Down). For the two, eight week school-based social skills training groups, the teachers selected and randomly divided the 18 students into Group A and Group B. Each group had nine students. The group size was never smaller than six in spite of sporadic student absences. During the time frame, none of the students moved out-of-the school district.

When the participating 18 students displayed conventional social behaviors, they began to exhibit appropriate study habits and made a significant improvement in their overall academic proficiency. The modified behaviors evolved within an eight week period of time as a result of a school-based, intensive social skills group training program, known as project KIND.

Of the 18 participating students, 14 dramatically improved their social behavior. When their noncompliant behaviors began to decline, the completion of their school assignments with increased accuracy was extraordinary. As an added feature, their written work became neater and more legible.

The beginning group sessions were very difficult to manage since it was soon realized that the teachers had sent students suspected with ADHD. These out-of-control boys and girls became known to the co-facilitators as "The Leaping Leopards." Subsequently, from the Groups' inception, either co-facilitator began contacting the parents for appointments in order to discuss their child's inattentiveness, impulsivity, and hyperactivity which was deleteriously effecting their academic success.

Appointments made with the area's only pediatric neurologist were scheduled four to six weeks from the parents' initial request. Frequently, the physician ordered an EEG, a "brain wave test" in layman terms, to rule-out any neural pathology. When ordered, another four to six weeks lapsed before any decision for medication was made by the physician.

Both groups of students were in classroom settings where the room arrangement was traditional. A suggestion for the teachers to create small learning centers and nooky study areas as well as breaking-up the outmoded seating of children in rows was minimally modified.

For the students who manifested severe aggressivity, inattentiveness, and hyperactivity, the writer provided the three classroom teachers involved demonstrations using behavioral modification techniques. Although only partially implemented by the teachers, there was still some notable improvement in their behavior. However, if the structure of the classroom was not tightly harnessed, the students chronically manifested off-task behaviors that unremittingly disturbed the other students.

Because the number of times aggressive and acting-out students sent to the office for disciplinary infractions decreased, the combination of the group sessions and the behavior modification techniques used in the classroom was felt to have influenced the improvement. While this appeared to bring about significant behavioral reform for most of the students, Barkley (1990) believes that long term improvements would only occur through medical treatment (Barkley, 1990) for those students suspected of ADHD.

In regard to those students who had been medically diagnosed with ADHD and placed on medication, the results were significantly reflected in their improved attitudes and modified behavior. As they became more congenial, cooperative, and enthusiastic group participants, the purpose of their being in the group became more meaningful to them. Quickly thereafter, the whole group began to bond and work together.

At the end of the school year, there were still six

students suspected of ADHD who had summer medical appointments. While they were able to show some progress in their social deportment, it was felt that their fidgetiness, inattentiveness, silliness, and impulsivity hampered their overall potential to make the progress expected.

Just prior to the initial group sessions, each of the 18 students was rated by the teachers using the Achenbach Behavior Checklist - Teacher Report Form (CBCL-TRF) (Edelbrock and Achenbach, 1968). The checklists were computer scored individually with every student receiving a percentile rating score for each of the following behavioral categories: anxiety, immaturity, unpopular, aggressivity, hostility, inattentiveness, and hyperactivity. The individual behavioral categories were then converted into a mean score and represented in graph form. The pretest procedure established the mean scores for both Groups, A and B.

Repeating the CBCL-TRF, immediately following the eighth session, all of the students were post tested. Their individual scores were again sorted by group and compared to their pretest percentile rankings. While all of the students improved, some made remarkable progress.

For the pretest and post test, the categories anxiety, immaturity, unpopularity, hostility, aggressivity, delinquency, inattention, and hyperactivity were investigated. All of the students' percentile scores in each of the aforementioned categories in Group A and B were

averaged to find the mean score.

When the percentile scores fell between the 93 and 98th, they were considered to be within a clinical band. Students whose scores were within this range flagged intervention. A therapeutic support group was felt be an ideal treatment model for them. When the ranking scores were at the 98%tile or above, they were considered severe and deviant. "The division across the profile was the 98 percentile which divided the normal range and the scores that were sufficiently deviant to be of concern because they exceeded those of 98% from the authors' normative sample." (Achenbach & Edelbrock, 1986, p. 21). The comparative results are presented in figures numbered 5 through 12.

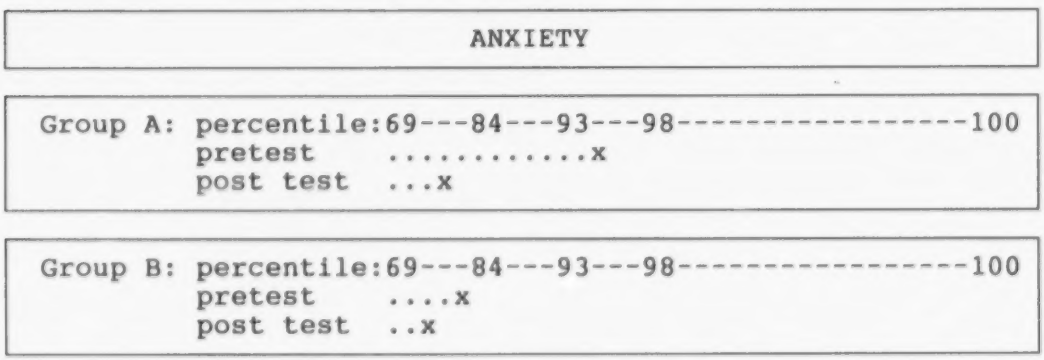

Figure 5. Results of the Post and Pretesting Achenbach's CBCL - TRF as it relates to the category of anxiety.

At the pretest time, three Group A students were characterized by their teachers as being frustrated, appearing lonely, and feeling insecure. It was not unusual for the ADD or ADHD children to manifest apprehensiveness, fearfulness and stress, all of which are characteristic of

anxiety. The data indicated that there were more ADD or ADHD suspects in Group A than in Group B.

The post test scores did not identify any Group A students to be overly anxious. Only one student in Group B was described as being mildly worrisome and nervous.

The post testing indicated that all of the students in Group A and Group B were functioning well within the normal band.

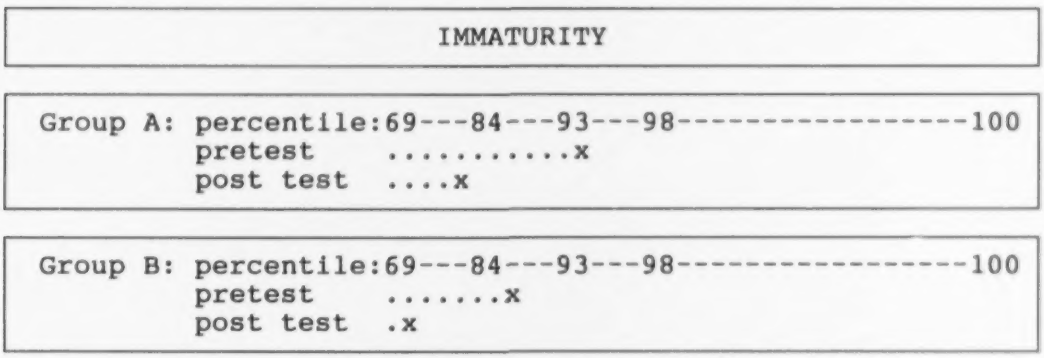

Figure 6. Results of the Post and Pretesting Achenbach's CBCL - TRF as it relates to the category of immaturity.

Four students in Group A were characterized with mild immaturity. They also manifested symptoms of ADD/ADHD. At pretest time, three of the four were also noted to be anxious however the results from the post test found these students to have normal percentiles in the anxiety and immaturity categories.

The pretest immaturity ranking scores for Group B were unremarkable. The post test scores for the category of immaturity indicated that the students in Groups A and B were within the normal limits.

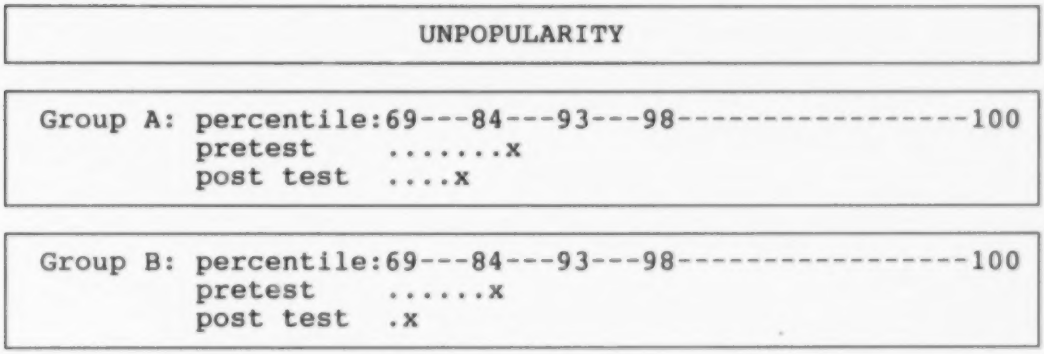

Figure 7. Results of the Post and Pretesting Achenbach's CBCL - TRF as it relates to the category of unpopularity.

Neither group according to the pretest and post test results was considered unpopular with peers who regarded them as entertaining and exciting. Surprisingly, they were not castigated by other children who perceived them to be tough and adventuresome. Thus, for both groups, the percentiles were well within the normal range.

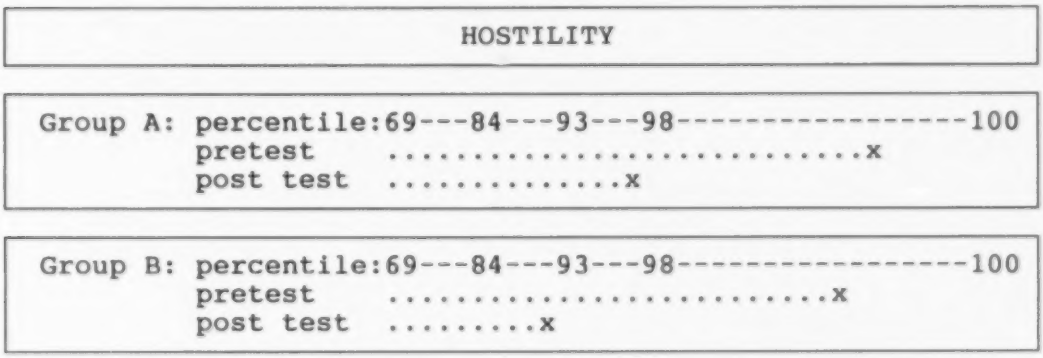

Figure 8. Results of the Post and Pretesting Achenbach's CBCL - TRF as it relates to the category of hostility.

The membership in both groups A and B was very hyperactive and impulsive. Twelve of the 18 students were referred for medical reviews. Prior to intervention, the pretest indicated that both groups had deviant

characteristics of being severely hostile.

The post test scores revealed that both groups A and B improved with Group B making the preferred progress. The medical treatment was believed to have affected the students' increased social adjustment.

Following the social skills training program, Project Kind, the post test scores identified Group A as being within the clinical band which indicated a need for counseling, psychotherapy, and/or a medical review to rule out ADHD. There were three angry, impulsive and moderate-to-severe hyperactive students in Group A. One of the three students was awaiting a medical appointment with a pediatric neurologist. It was noted that these identified student's individual pretest and post test rankings skewed the mean score for the group. Much of their hostile behaviors were perceived to be features related to ADHD. From the teachers' perspective, these children who tended to be extremely sensitive and over-reactive when frustrated appeared to be hostile.

Group B made appreciable gains because the students suspected and later confirmed with the diagnosis of ADHD were medically evaluated and prescribed with stimulant medication, Methylphenidate (Ritalin). The medication regime and the social skills training support group (psychological method of treatment) in combination were felt highly beneficial. The results of Group B's post test ranking showed that they were well within the normal band.

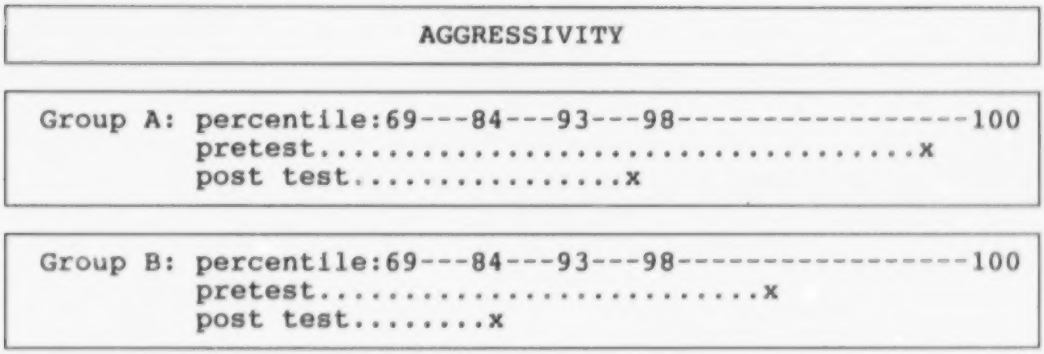

Figure 9. Results of the Post and Pretesting Achenbach's CBCL - TRF as it relates to the category of aggressivity.

The pretest rankings for Group A and Group B were within the deviant band indicating a severe problem. The students who acted-out their anger in abusive manners, were unaware that they could not control their anger. Most of the students recognized with aggressivity were felt to manifest characteristics of ADHD.

During the program, there were two students in Group B who were prescribed medication for their inattentiveness and hyperactivity. The post test scores revealed a dramatic reduction in their aggressive behavior.

Group A was comprised of two students whose parents did not respond favorably to a medical evaluation. Another student was awaiting his medical appointment. These three boys did not make significant gains. With their aggressivity, high activity level and poor listening skills, they negatively affected the group's rating. The percentile for Group A's mean score was subsequently skewed.

The results between Group A and Group B seemed to suggest the importance of accurately diagnosing ADD or ADHD

and receiving medical treatment. The combination of a medication regime and a social skills training group appears to indicate the ideal approach to helping students with ADHD or ADD.

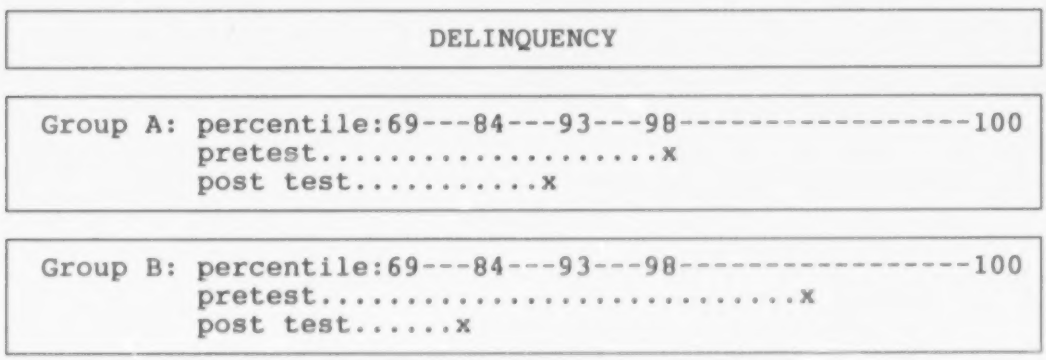

Figure 10. Results of the Post and Pretesting Achenbach's CBCL - TRF as it relates to the category of delinquency.

Group A was the livelier and the more active of the two groups. Greater impulsivity was also characterized Group A. As a result, they were unconsciously inconsiderate youngsters. Initially they did realize that much of their behavior was actually abusive and hurtful to their teachers, their classmates, and the co-therapists as well.

The post testing indicated that both Groups, A and B, made impressive gains. They become less insensitive of others. From a moral standpoint, they recognized and developed a sense of what's right from what's wrong and were able to relate it to helping or hurtful behaviors. Their relationships with others dramatically improved.

When young children below the ages of ten or eleven years receive intervention treatment like social skills

training, the writer believes that a developing sociopathic or antisocial personality/behavioral patterns can be suppressed.

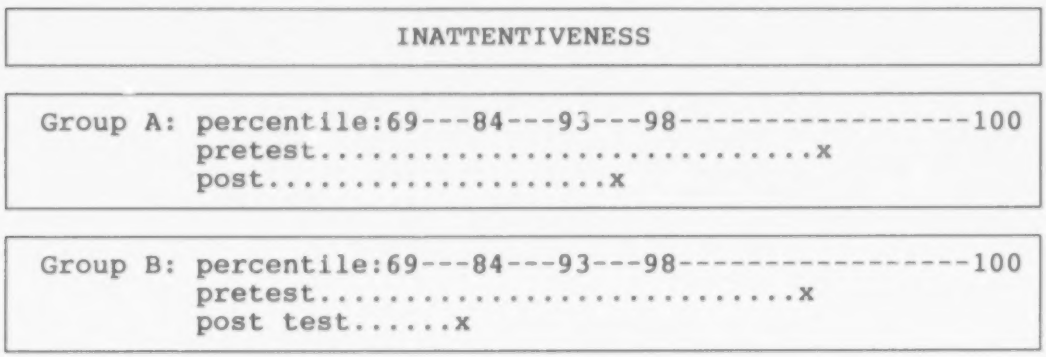

Figure 11. Results of the Post and Pretesting Achenbach's CBCL - TRF as it relates to the category of inattentiveness.

The students in Group B who were placed on medication manifested dramatically improved behavior. With increased concentration, they became better listeners and were able to stay on tasks as well as complete them. As a result their accuracy reinforced their academic achievement which was reflected in the average or better grades they received.

Before medication, the students admitted to feeling shame and guilt. It was a comfort to them to know they weren't born being bad. In essence, the children felt a sense of relief.

Three students in Group A did not receive medical treatment. Though their behavior improved, it was not self-directed. Unfortunately, their percentile rankings skewed the group mean.

It was interesting that some of the students in Group B who were also in Group A's classroom suggested to one hyperactive that he see "this doctor who fixes kids so they can be good."

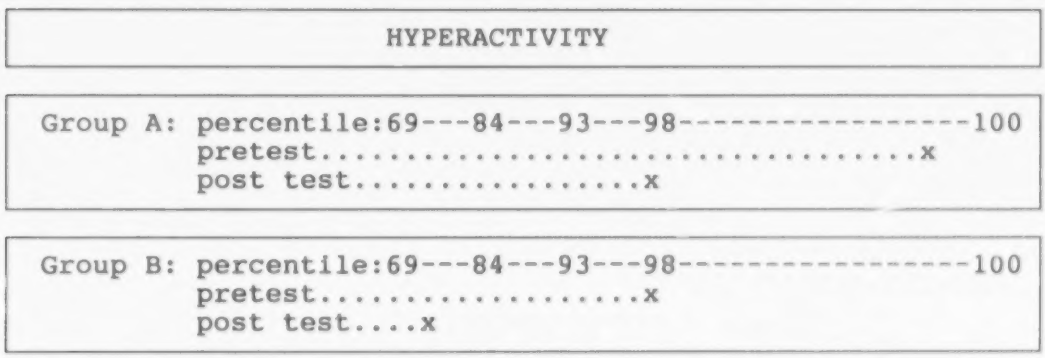

Figure 12. Results of the Post and Pretesting Achenbach's CBCL - TRF as it relates to the category of hyperactivity.

Group B did not exhibit the extreme acting-out behaviors as Group A, nicknamed "The Leaping Leopards." The students who were suspected of ADD or ADHD were successfully treated and their hyperactivity dissipated.

While seven of the nine students in Group A did improve, three students were severely hyperactive, impulsive, and inattentive. Although they were awaiting medical evaluations which was believed to be in their best interests, their continuing lack of self-control affected their overall behavior which again skewed the group's mean.

Two students in Group A made only minimum gains in the attention and hyperactivity categories. These students had not been medically evaluated for ADHD (American Psychiatric Association, DSM-III-R, 1987).

In summary, all the students in Groups A and B made considerable improvements in the categories of anxiety, immaturity, unpopularity, hostility, aggressivity, delinquency, inattention, and hyperactivity as revealed in the presented post testing scores. Identified as noncompliant second grade children, their overall social adjustment in the school setting was remarkably modified. Their discipline problems significantly declined and their peer relationships improved. With more positive attitudes about coming to school to work in order to learn, the targeted population developed study habits which enabled them to raise their failing or near failing grades. Five students, one from Group A and the remaining from Group B, manifested consistent accuracy which steadily rose to near-perfect achievement levels.

Discussion

A mini-inservice was held for the second grade teachers and classroom aides to address the goal and objectives of the social skills training group, Project KIND, prior to its implementation. A brief question and answer session followed the project's introduction.

The Child Behavior Checklist - Teacher Rating Form (CBCL - TRF) was chosen as an instrument for "description of standardized behavior" (Achenbach & Edelbrock, 1986, p. iii) and introduced to the teachers. This evaluation was highly rated by Grille (1985, Freeman (1985), Kelly (1985), McConaughy and Ritter (1985) in the Ninth Mental

Measurement Yearbook.

After explaining to the teachers, the pretest and post test completion procedure using the Achenbach Child Behavior Checklist - Teacher Rating Form (CBCL - TRF), the checklists for the pretest were distributed among them to complete on each of their selected students for the social skills training support group.

At the close of the mini-inservice, the parent permission forms were explained and disseminated. No student was able to participate in the group without written parental permission. Whether the parent wanted an individual conference with the group co-facilitators and/or rendered permission for their child to be video taped in the group sessions were designated by their check marks in the yes and no boxes.

Thirty parental permission forms were solicited to the parents and 24 returned. The teachers made the final selection of 18 students.

All of the 18 noncompliant students selected were pre-assessed by the referring teachers using the Achenbach Child Behavior Checklist - Teacher Rating Form, (CBCL-TRF), (Achenbach & Edelbrock, 1986) prior to the start of Project KIND. The teacher completed checklists addressed the categories: anxiety, immaturity, unpopularity, hostility, aggressivity, delinquency, inattentiveness, and hyperactivity as the primary behaviors falling in the mild-to-severe deviant range. The instrument provided

important behavioral data about the referred students. The CBCL-TRF checklists were computer scored and the print-out results were graphically represented. Either facilitator reviewed the results which were displayed as individual student profiles with the teachers. As indicated by the behavioral checklists most of the students had characteristics of ADD or ADHD. The writer believed it was the appearing ADD or ADHD features of noncompliance and disruptiveness that determined the teachers' student selection.

To glean supplemental student information, interviews were conducted by the co-facilitators with the referring teachers, the former teachers, and the principal. When relevant, the writer met with the playground supervisors, bus drivers, and other significant school personnel.

The students who disturbed the classroom with their noncompliant behaviors were social misfits with their inappropriate and unacceptable conduct. Understandably, their task refusal affected their academic success. These socially and academically failing prime at-risk students were designated candidates for early school departure that could burden the taxpayers with their unemployment, welfare, addiction rehabilitation, mental health treatment, and/or incarceration costs.

The teachers had referred the most problematic students. In the group setting which was less structured in format than found in the classroom, their provocative

behaviors quickly surfaced. Of the 18 students, 12 exhibited characteristics of ADD or ADHD. Since Group A was considerably more active than Group B, it was a challenge addressing the concepts of the social skills training program. They became privately known as "The Leaping Leopards."

Of the 18 students, four boys were extremely hyperactive with oppositional defiant behaviors (ADHD+ODD); two girls and four boys were moderately hyperactive (ADHD), and two boys had difficulty with attention (ADD). Without medical treatment for their hyperactive handicapping condition, they were easily overstimulated and readily lost their self-control. Their perpetuated acting-out behaviors succeedingly obstructed the planned agenda and needed to be addressed and abruptly quelled.

The parents of the suspected ADD or ADHD students were promptly contacted by telephone or personally met. In the meantime, the teachers were asked to complete, in addition to the Achenbach instrument, both the Acters and Conners checklists.

When two students were placed on medication by their physicians, their behavior immediately and dramatically improved; thereafter, they became more attentive and productive in the group sessions. As the groups recessed for the summer, six of the 18 students had pending medical appointments. One of the six students had kept his initial evaluation with a pediatric neurologist and was scheduled

for an EEG test right after school recessed. While three parents were reluctant to accept the co-facilitators' diagnostic impressions, they did agree to investigate ADD or ADHD further by promising to begin with their family physician. The advantage of having the ongoing support group continue in the fall makes it convenient to contact the parents regarding their follow-through on the medical reviews. Two parents who were not receptive to any medical model had not connected ADD or ADHD with school failure and depressed social skills. There were five students who did not appear to have neurobiological impairments. Two of the five parents began attending child management training classes. One of them became intensely involved and started to work more closely with the teacher.

Fourteen of the students reside in one parent homes. Many of the students felt neglected and confused. They seemed to be rearing themselves or frequently left with other caregivers.

One parent, a noncustodial parent, was described as being addicted to alcohol. Many of the students implicated their parents as borderline alcoholics.

It was learned that all of the students who had difficulty dealing with their anger in a socially accepted conventional manner without physical confrontations, were physically abused. For those who alleged continuing patterns of abuse, the families were referred to protective services. The students who were taught to recognize abuse

in their own and neighborhood families were given the protective services telephone number to call. After the students began to solve their problems without physical abuse, they reported getting along with their siblings to the point of being able to share activities with them.

Four of the students revealed being sexually abused when they were younger. The carry-over of their shame, anger, and guilt were in the final process of resolution as the groups terminated for the summer. After school reconvenes in September, these students volunteered to work further in a support group when it resumes.

Since students disclosed moderate to severe abuses that they had incurred, the co-facilitators began to focus upon what abusive behaviors are. The group defined four types of abuse. They were verbal, physical, sexual, and emotional (mental). The students learned that all forms of abuse carry with it emotional hurt and shame. This became the theme to help the students understand what ingredients are found in individuals thought of as being kind. The group basically described a kind person as caring, sharing, helpful, honest, and responsible. After making the distinction between winners and losers, Project KIND's motto became "Winners Help - Losers Hurt." The students presumed that the obvious and opposite characteristics of being hurtful, unkind, bothersome, and irresponsible describe "Losers" and that "Winners" are kind.

The students began to understand the concept of

"school" and learned the real meaning of learning. None of the students knew that they come to school to work and that learning is an outgrowth of their hard work. They did not realize that much of what they had learned was learned outside the school setting. They began to realize that failure, usually linked with task incompletion, was very often contributed by an unsatisfactory attitude and noncompliant behaviors.

As the groups solidified and congeniality began to emerge, the students settled down and began to work. By adopting strategies to strengthen anger control in a non-abusive manner as well as increasing their respect, consideration, and kindness for others, the members began to practice with "thinking tools." These helped the students to examine the options, predict anticipated outcomes, and make rational choices. Using these techniques they commenced to problem-solve more diplomatically. When they made better decisions, their overall social skills improved, the practicum's first objective.

When the noncompliant students began to exhibit more acceptable and appropriate social skills, they became more serious about their academic achievement. After their study habits improved, the practicum's second objective, their personal satisfaction began to elevate their self-esteem, self-confidence, and self-competency.

At midpoint, one of the two hyperactives was "adopted" by an older boy who on his own began rewarding him with

trinkets and other paraphernalia brought from home for "being good" in the group.

The writer arranged weekly conferences with the teachers which included their questions and comments about the students. The consultations also addressed how the teachers could provide continuity to the project by reinforcing the concepts being taught in their own classrooms. Several behavioral techniques were suggested based on the behavioral modification model.

The teachers kept records of the students' completed work, their improved academic skill mastery, and the decreased number of infractions requiring the principal's intervention. The students learned that when they caused their noncompliance to go down, the effect was that their grades went up. This data documented by the teachers' grading system helped to evaluate the carryover from the group sessions and ultimately measured the group's progress.

The writer maintained record keeping in a journal with anecdotal notes which also included the results of the Achenbach checklists, the data of the students' academic performance, and their observable social improvements.

The results of the Achenbach CBCL-TRF post-testing revealed 10-20 percent improvement. Two students progressed above the expected outcome and eight students meant the criteria in one or more categories. The students who were severely hyperactive with oppositional defiant disorders made minimal gains in one or two categories.

When the groups bonded, they made extraordinary progress. The development of empathy and concern for others was exhibited when they helped other group members instead of hurting them. They became improved listeners and anticipated their next scheduled group with eagerness.

When socially acceptable and appropriate behaviors were well established, the student was honored with "graduation". Of the graduating members, twelve students were presented with a certificate of merit and allowed to choose a poster.

Graduated students visited the on-going groups from time to time and gave testimonials to other students in support of the group. Six students attended the newly formed on-going support group which was frequently visited by "graduates". The teachers reported they would ask to go to group which was contingent upon their work being finished.

The end of the school year meant dismissal for the summer and the groups chose to celebrate their last time being in group together with party called, "Make-Your-Own Sundae On Thursday."

In conclusion, pretesting and post testing the referred students with the CBCL-TRF (Achenbach & Edelbrock, 1986) provided data that indicated the students' overall general functioning and substantiated that the goal and objectives had been met. When the students' social skills improved, they displayed improved study habits and increased academic achievement as well.

Recommendations

The administration and teachers would benefit from ADD and ADHD inservice training.

Prior to beginning a social skills training group, it is suggested that students with moderate to severe hyperactivity and/or with a chronicity of task incompletion be referred for medical evaluations to rule-out ADHD/ADD.

With all of the 18 students wanting to continue, it was recommended to the principal that following the summer recess, the number of support groups be increased to accommodate the anticipated increase of teacher referrals. Through word of mouth parents were requesting social skills training for their children. If a brother or sister participated in Project KIND, parents were asking that it be made available for their other children. As problems continued in all of the elementary classrooms, other teachers were asking for the program to be available for them, too. Subsequently, it was suggested that Project KIND be multi-graded in composition whenever possible.

It was believed that monies need to be sought to help fund support groups for all students and not exclusively earmarked for special education's restricted benefit.

The concept of providing a male and a female co-facilitator/co-therapist team is highly recommended for continuation since they extend gender control and effect greater student social/behavioral adjustment.

Dissemination

Other Project KIND groups were initiated in five elementary schools in another school district. The male and female co-facilitators/co-therapists provided a viable quasi-family group composition. One group "grew" to 15 members whose ages ranged from seven to twelve years. The age differences represented appeared to bring about group cohesiveness and subsequent bonding. Older students wanted to help younger students and visa versa. The school reported that the students looked after each other on the playground, in the cafeteria, and at the bus stops.

The same goal that appropriate social skills would address the objectives of improved study skills and increased academic achievement was successfully met. The repeated use of the Achenbach checklist as a measurement established that the program in both school districts were successful.

Two articles appeared in the local newspapers featuring the concept of Project KIND with its goal and objectives.

A grant was written and submitted to the Mott Community Foundation based on this model. The approval is forthcoming.

The co-therapists have been invited to present this model to the School Social Workers' annual state conference in October of 1991.

References

Achenbach, T. M., & Edelbrock, C. (1983). Manual for the child behavior checklist and revised behavior profile. Burlington, VT: University of Vermont. Department of Psychiatry.

Achenbach, T. M., & Edelbrock, C. (1986). Manual for the teacher's report form and teacher version of the child behavior profile. Burlington, VT: University of Vermont. Department of Psychiatry.

American Psychiatric Association. (1987). Diagnostic and statistical manual of mental disorders (rev. 3rd ed.) Washington, DC: author.

Baker, J., & Sansone, J. (1990). Interventions with students at risk for dropping out of school: a high school responds. The Journal of Educational Research. 83(4), 181-186.

Bannach, W. J. (1990, January). Ten top issues: Need for national educational goals and standards will haunt schools. Michigan Association of School Boards. 7-9, 28.

Bard, J. (1980). Rational-emotive therapy in practice. Champaign, IL: Research Press.

Barkley, R. A. (1990). Attention deficit hyperactivity disorder. New York: The Guilford Press.

Barkley, R. A. (1987). Defiant Children. New York: The Guilford Press.

Becker, W. C. (1971). Parents are teachers. Champaign, IL: Research Press.

Berne, E. (1961). Transactional Analysis in Psychotherapy. New York: The Grove Press.

Butler, O. B. (1989, January). Early help for kids at risk: our nation's best investment. NEA Today (Special Education) Issues '89. pp. 50-53.

Cahoon, P. (1988). Children and violence: mediator magic.

Educational Leadership. 45(4), 92-94.

Cairns, R. B., Cairns, B. D., Neckerman, H. J., Ferguson, L. L., & Gariepy J. L. (1989). Growth and Aggression: Childhood to Early Adolescence. Developmental Psychology. 25(2), 320-330.

Chess, S. & Thomas, A. (1986). Temperament in Clinical Practice. New York: Guilford Press.

Clark-Stewart, A. K. (1989, January). Single-parent families: how bad for the children? NEA Today (Special Education) '89 Issues. pp. 60-64.

Compas, B. E., Howell, Phares, Williams, & Ledous. (1988). Parent and Child Stress. Developmental Psychology. 25(4). 554-559.

Comer, J. P. (1987). New Haven's school community connection. Educational Leadership. 44(6). 13-16

Conners, K. E. (1989). The Conners' Teacher Scales Computer Program. North Tonawanda NY: Multi-Health Systems.

Cremin, L. A. (1989). Popular education and its discontents New York: Harper and Row Publishers.

Curwin, R. L., & Mendler, A. N. (1988). Discipline with dignity. Alexandria VI: Association for Supervision and Curriculum Development.

DeBlois, R. (1989). Keep at-risk students in school: toward a curriculum for potential dropouts. NASSP Bulletin. 73 (516), 6-12.

Dimidjian, V. J. (1989). Early childhood at risk: actions and advocacy for young children. Washington, DC: National Education Association of the United States.

Dinkmeyer, D. & McKay, G. D. (1982). The parent's handbook (STEP) systematic training for effective parenting. Circle Pines, MN: American Guidance Service.

Dobson, J. (1978). The strong-willed child. Wheaton, IL: Tyndale House Publishers.

Dreikurs, R. (1968). Psychology in the classroom. (rev. 2nd ed.). NY: Harper & Row Publishers.

El-Sheikh, M. Cummings, E. M. Goetsch, & V. L. Coping. (1989). With adults' angry behavior: Behavioral, physiological and verbal responses in preschoolers (children's reactions to adults' emotions. Developmental Psychology. 25(4). 190-198.

Ellis, A. & Grieger, R. (1986). RET: Handbook of rational-emotive therapy. Vol I and Vol II. New York: Springer Publishing Company.

Forehand, R. L., & McMahan, R. J. (1981). Helping the noncompliant child. New York: The Guilford Press.

Fox, R. G. ((1990). Social skills training: teaching troubled youths to be socially competent. In M. Krueger & N. Powell (Eds.). Choices In Caring. 39-64. Washington, DC: Child Welfare League of America.

Freeman, B. J. (1985). Review of child behavior checklist. In James V. Mitchell (Ed.). The Ninth Mental Measurement Yearbook. (pp. 300-301). Lincoln, NE: The University of Nebraska Press.

Gatto J. (1990). The Curriculum of the family: therapy for our psychopathic schools: Teacher Magazine. 1(10). 58-50.

Gardner, R. A. (1986). The psychotherapeutic techniques of Richard A. Gardner. Cresskill, NJ: Creative Therapeutics

Gardner, R. A. (1979). Understanding Children. Cresskill, NJ: Creative Therapeutics.

Glasser, W. 1990. The quality school (managing students without coercion). New York: Harper & Row Publishers.

Gordon, T. (1972). Teacher Effectiveness Training. Pasadena CA: Effectiveness Training Associates.

Gordon, T. (1970). Parent Effectiveness Training. New York: Wyden, Inc.

Grill. J. (1985). Review of behavior evaluation scale. In J. V. Mitchell (Ed.), The Ninth Mental Measurement Yearbook. (pp.159-160). Lincoln, NE: The University of Nebraska Press.

Gross, S. (1987, March). Coping with hostile-aggressive students. Michigan school Board Journal 8-9.

Gresham, F. M., & Lemanek, K. L. (1987). Parent education. In C. A. Maher & S. G. Forman (Eds.). Hillsdale, NJ: Lawrence Erlbaum Associates, Behavioral approach to education of children and youth. pp. 153-181.

Hlebowitsh, P. (1990). Playing power politics: how a nation at risk achieved its national stature. Journal of Research and Development in Education. 23(2), 82-88.

Howing, R. T., Wodarski, J. S., Kurtz, P. D., & Gaudin, J. M. (1990). The empirical base for the implementation of social skills training with maltreated children. Social Work. 35(5), 460-467.

Hymes, J. L. (1989). Early childhood education: the year in review, a look at 1989. Washington, DC: National Association for the Education of Young Children.

Johnson, D. W., & Johnson, R. T. (1990). Social Skills for successful group work. Educational Leadership. 47(4) 29-33.

Katz, E. M., (1988). Group work in a junior high school. School Social Work Journal. V(1), 11-19.

Kaufamn H., & Cicchetti D. (1988). Effects of maltreatment Developmental Psychology. 24(6), 517-524.

Kazdin, A. E. (1987). Conduct disorders in childhood and adolescence. Newbury Park, CA: Sage Publications.

Kelley, M. (1985). Review of child behavior checklist. In James V. Mitchell (Ed.), The Ninth Mental Measurement Yearbook. Lincoln NE: The University of Nebraska Press.

Kinsbourne, M. & Kaplan, M. (1979). Children's Learning and Attention Problems. Boston, MA: Little, Brown and Company.

Kostermol. M. J., & Stein, L. C. (1989). Conflict resolution: helping children settle their disputes. The Beacon. (Michigan Association for the Education of Young Children. 9(1), 3-8.

Kuczynski, L., & Kochanska, G. (1990). Development of children's noncompliance strategies from toddlerhood to age 5. Developmental Psychology. 26(3), 398-408.

Ladd. G. (1990). Having friends, keeping friends, making friends, and being liked by peers in the classroom: predictors of children's early school adjustment? Child Development. 61(4). 1080-1100.

Lovins, J. & Bogal R. (1980). Role play: A tool for handling interpersonal conflict in the classroom. School Social Work Journal. V(1), 41-10.

Marsh, W. H., & Holmes, I. W. (1990), Multidimensional self-concepts: construct validation of responses by children. The Educational Research Journal. 27(1), 89-117.

Masters, J. A. (1968). TA for you. Flint, MI: Genesee Intermediate School District.

McCarney, S. B., & Bauer, A. M. (1989). The parent's guide: solutions to today's most common behavior problems in the home. Columbia, MO: Hawthorne Educational Services.

McConaughy, S. H., & Achenbach, T. M. (1988). Practical guide for the child behavior Checklist and related materials. Burlington, VT: University of Vermont. Department of Psychiatry.

Mize J., and Ladd, G. W. (1990). Cognitive-social skills training. Developmental Psychology. 26(3), 390-397.

Nucci, L. (1987). Synthesis of research on moral development. Educational Leadership. 44(5), 86-92.

Patterson, G. R., & Gullion, M. E. (1971). Living with children (rev. ed.). Champaign, IL: Research Press Company.

Ramsey, E., & Patterson, G. (1989). Coping with antisocial children. Principal. 69(2), 34-36.

Reed, S., & Sautter, R. C. (1990). KAPPAN Special Report Children of poverty: the status of 12 million young Americans. Phi Delta Kappan. 71(10), k1-12.

Reich, W. (1949). Character Analysis. New York: The Noonday Press.

Rettig, E. B., & Paulson, T. L. (1875). ABCs for teachers Van Nuys, CA: Association for Behavioral Change.

Rist, M. (1990). The shadow children. The American School Board Journal. 177 (1), 19-24.

Robinson G. (1990). Synthesis of research on the effects of class size. Educational Leadership. 7(1), 80-90.

Roderick, T. (1988). Johnny can learn to negotiate. Educational Leadership. 45(4), 86-90.

Rose, S. R. (1986). Enhancing the social relationship skills of children: a comparative study of group approaches. School Social Work Journal. 10(2), 76-85.

Ruhl, K. & Hughes, C. (1982) Controlling physical violence in the classroom. In Bob Algozzine (ed.), Problem Behavior Management. Rockville, MD: An Aspen Publication.

Sagor, R. (1988, April). Teetering on the edge of failure. Learning. pp. 29-34.

Sanchez, F. & Anderson, M. ((1990). Gang mediation: a process that works. Principal. 69(5).

Sancilio, M., Plumert J., Hartup W. (1989). Friendship and aggressiveness as determinants of conflict outcomes in Middle childhood. Developmental Psychology. 25(5), 12-19.

Shane, H. G. (1989). Educated foresight for the 1990s: a planned curricula for tomorrow's students, cultivating the ability to understand. Educational Leadership. 47(1), 4-6.

Smith, J. M., & Smith, D. E. (1976). Child Management. Champaign, IL: Research Press.

Staff Michigan association of school boards. (1987, May). Reports on public education 1986: a summary of majority recommendations: what works: research about teaching and learning. pp. 10.

First lessons: a report on elementary education in America pp.9-16.

Star, B. (1980). Patterns in family violence. Social Casework. 61(6), 339-347.

Stephenson, D. (1990). Affective consequences of teachers' psychological investment. Journal of Educational Research 84(1) p.53-57.

Thomas, R. M. (1985). Kohlberg's Moral Development Theory. In Comparing theories of child development. (2nd ed.). (pp.351-369). Balmont, CA: Wadsworth Publishing Company.

Tomlinson, T. M. (1990). Class size and public policy: politics and panaceas. For Chester E. Finn, Jr., Assistant Secretary for Research and Improvement and Counselor to the Secretary. U.S. Government. p. 1-37.

Toth, M. K. (1990). Understanding and treating conduct disorders. Austin, TX: PRO-ED.

Ullmann, R., Sleater, E., & Sprague, R. (1988). Acters Profile. Champaign, IL: MetriTech, Inc.

Valett, R. E. (1969). Modifying children's behavior. Belmont, CA: Fearon Publishers.

Valentine, D., Freeman, M., Acuff, D., & Andreas, T. (1985). Abuse and neglect: identifying and helping school children at risk. School Social Work Journal. IX(2),83-99.